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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

15 2

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/282,274
Filing Date	March 31, 1999
First Named Inventor	Brian Mo
Group Art Unit	2811
Examiner Name	S. Hu
Attorney Docket Number	018865000800

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

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| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
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Remarks

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP William E. Winters	Reg No. 42,232
Signature		
Date	09/21/01	

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Alison Bowden

(Depositor's name)

(Signature)

September 21, 2001

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/282,274	03/31/99	007 HU, S	2811	07/16/01
First Named Applicant	MO,	35 USC 154	(b) term ext. =	0 Days.

TITLE OF INVENTION TRENCH TRANSISTOR WITH A SELF-ALIGNED SOURCE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 18865.8US	257-330.000	J11	UTILITY	NO	\$1240.00	10/16/01

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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Townsend and Townsend
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Fairchild Semiconductor Corporation

(B) RESIDENCE: (CITY & STATE OR COUNTRY) South Portland, Maine

Please check the appropriate assignee category indicated below (will not be printed on the patent)

- ☐ Individual ☒ Corporation or other private group entity ☐ government

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